24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Priorities USA Action	
	C C00495861
Check if 24-hour report 48-hour report New report Amends report filed	d on Mam / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Shorr Johnson Magnus	10 18 2016
Mailing Address 100 N 20th St	10 10 2010
Ste 201	Amount
City State Zip Code	44469.15
Philadelphia PA 19103-1454	Transaction ID : VNTYH9TSHD0 Date of Disbursement or Obligation
Purpose of Expenditure Video Production (Estimate) Category/ Type	10 18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	ee Sought: House District: 00
TRUMP, DONALD J, , ,	President Senate State: 00
Calendar Year-To-Date Per Election for Office Sought Disb 2016	oursement For: Primary
Full Name of Payee	Date of Public Distribution/Dissemination
Targeted Platform Media LLC	M M / D D / Y Y Y Y
Mailing Address 1291 Hollywood Ave	10 18 2016
Malling Address 1291 Hollywood Ave	Amount
City State Zip Code	6782207.75
Annapolis MD 21403-4909	Transaction ID: VNTYH9TR819 Date of Disbursement or Obligation
Purpose of Expenditure TV Ad Buy (Estimate) Category/	M = M / D = D / Y = Y = Y
TV Ad Buy (Estimate)	10 18 2016
Name of Federal Candidate Support Office	ce Sought: House District: 00
TRUMP, DONALD J, , ,	President Senate State: 00
Calendar Year-To-Date Dist	pursement For: Primary X General
Per Election for Office Sought 102189550.95 201	
(a) SUBTOTAL of Itemized Independent Expenditures	6826676.90
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
	10 20 2016
Signature	